1. PLACE OF DEATH (If contain consistent limits, plan DOWNSHIP with 12 and DOWNSHIP with 12 a					SION OF HEALTH - STANDARD CERTIFICATE OF DEATH C HEALTH AND WELFARE 00 -62-0224	<u>35</u>
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AND STATE OF DECEMBED First Middle Lest 1. OATE Month Day Yes (Type or priori) A	0280				c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR 11 OF 12 OF 15 OF 1	
AND STATE OF DECEMBED First Middle Lest 1. OATE Month Day Yes (Type or priori) A	30250	<u> </u>		Ι.	INSTITUTION ON ALGAMAY 8	Yes 🗆 No 🏲
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13. MARE OF HUSAND OR WIJE 14. NAME OF HUSAND OR WIJE 15. WAS DECEASED EVER IN U.S. ARMED FORCES? 15. WAS DECEASED EVER IN U.S. ARMED FORCES? 15. SOCIAL SECURITY NO. 17. INFORMANT 18. CAUSE OF PREATE (Force) or one couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line for the part in the couple per line for line	6	₹		ı		
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18. CAUSE OF DEATH (Enter only one cause per line for part 1. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (6) Intal accident Caused. Immediate Ca	.,			1		ולוח בה
IMMEDIATE CAUSE (5) Datal accident Caused. During Conditions, if eny, which gave rise to stating the underlying cause last. DUE-TO-(c) Quantum Lug Cluster During Countries and the stating the underlying cause last. DUE-TO-(c) Quantum Lug Cluster During Countries of Injury in PART II. of Item 18.] PART II. OF INTER SIGNIFICANT CONDITIONS CONTRIBUTING TO/DEATH but not related to the terminal PART III. II. deceased was female there a pregnancy in last of the personney in last of	_X		_	. -	1 18. CAUSE OF DEATH (Enter only one cause per line to	ERVAL BETWEE
Which gave rise to above cause (a), stating the under-lying cause last. DUE-TO-(c) DUE-TO-(/	1 1 1				SET AND DEATH
Which gave ties to above cause (a), stating the underlying cause least. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO/DEATH but not related to the terminal disease condition given in PART I (a) PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO/DEATH but not related to the terminal disease was female there a pregnancy in last of the terminal disease condition given in PART I (a) PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO/DEATH but not related to the terminal disease was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a pregnancy in last of the terminal disease condition given in PART II (a) PART III. If deceased was female there a preg	- 0	정정	§		IMMEDIATE CAUSE (a) Total accident Caused luy	
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Thomas Hellen STEELVILLE, MO. 6-12-62			 ↓ ↓ ↓ ↓ ↓ ↓	: -	23a. NAME OF CEMATORY 23d. LOCATION (City, town, or county)	(State)
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= Thomas & Haller STEELVILLE, MO. 16-12-62		 		-		
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[Licensed Embalmer's Statement on Reverse Side]		1 1	1 1 1	W.	(Licensed Embalmer's Statement on Reverse Side)	

1961 C 10N

STATEMENT BY LICENSED EMBALMER

	hereby certify that the body whose name is	recorded on the reverse side of this certificate was embalmed by me,
working (under my personal supervision.	Signed France S. Halbert
,,	Signature of Student Embalmer	Licensed Embalmer No. 4337 P. O. Address

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.